

LI000014522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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L. SELLERS

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FILED
13 FEB 27 PM 12:42
CLERK OF SUPERIOR COURT
SALT LAKE COUNTY, UTAH

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW 2 U Furniture & More, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aimee Billings

Name of Person

Firm/Company

1102 S. US Highway 1

Address

Fort Pierce, FL 34950

City/State and Zip Code

NotYourTypiclStr@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aimee Billings at (772) 519-6514

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2013

AIMEE BILLINGS
1102 S. US HIGHWAY 1
FORT PIERCE, FL 34950

SUBJECT: NEW 2 U FURNITURE AND MORE, LLC
Ref. Number: L11000014522

We have received your document for NEW 2 U FURNITURE AND MORE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Leslie Sellers
Regulatory Specialist II

Letter Number: 713A00001478

FILED
13 FEB 27 PM 12:42
TALLAHASSEE, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: New 2 U Furniture & More, LLC

2. (a) Principal office address of limited liability company: 1102 S. US Highway 1
(Note: MUST BE STREET ADDRESS) Ft. Pierce, FL 34950

(b) Mailing address of limited liability company: 1102 S. US Highway 1
(Note: MAY BE POST OFFICE BOX) Ft. Pierce, FL 34950

02/03/2011 L11000014522

3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: EVERYTHING & MORE THRIFT STORE

Registered Office Address: 3218 S. US Highway 1
Ft. Pierce, FL 34982

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: EVERYTHING & MORE DISCOUNT OUTLET

NEW Registered Office Address: 1102 S. US Highway 1
(MUST BE FLORIDA STREET ADDRESS) Ft. Pierce, FL 34950

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Aimee Billings
Signature of a member or authorized representative of a member

Aimee Billings
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Aimee Billings
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00